

MOTOR VEHICLE UTILIZATION AND DUTY-TO-DOMICILE REPORT (FTRRF)

FROM : DISTRICT # _____ (ASSIGNED DRIVER/DUTY LOCATION)

THRU : DISTRICT NCOIC

FOR : DET 5 STARC (CAMP-RR/GSA Vehicle Rep)

NOTE: TO ARRIVE AT NCOIC OFFICE NLT 2ND WORK DAY OF THE MONTH. NCOIC WILL REVIEW AND SIGN BELOW AND FORWARD, TO ARRIVE AT CAMP-RR NOT LATER THAN THE 6TH WORKING DAY OF THE MONTH.

REPORTING PERIOD		MAKE/MODEL OF VEHICLE		VEHICLE TAG NUMBER		
Date	Previous Mileage	Fuel Added	Oil Added	OVERNIGHT STORAGE	Granted By NCOIC	Operator's Signature
	Ending Odometer			Enter "1" If stored at duty station or Enter address of other storage site		
Total	MILES	FUEL	OIL	REVIEWED BY NCOIC		